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ABSTRACT

Adolescence has been identified as a period when appreciable gender differences begin to occur in the nature and frequency of depressive symptoms. Following puberty there is a sharp increase in the frequency of depression among girls and an apparent decrease in the frequency of depression in boys. The Block and Block longitudinally-followed sample was used in this study in which subjects (N=87) at age 18, completed the Center for Epidemiological Studies Depression Scale. Scores on this scale were then related to psychologically comprehensive observer evaluations and self-report ratings of adolescent personality. Results showed that 18-year-old adolescents with depressive tendencies differed, as early as grade school, in their personality structure. Male dysthymic adolescents were externalizing; female dysthymic adolescents were internalizing. These gender differences continued over the next decade and into adolescence. As might be expected from relations spanning many years, and with many other influences operating in between, these prospective relations were not as strong as concurrent results. These gender-differentiated findings raise the possibility that there is a personality structure vulnerable to depression, that this vulnerability can be identified early in life, and that it differs for girls and boys. (ABL)

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A Prospective Study of Adolescent Dysthymia

The Early Personality Context of Adolescent Dysthymia:
A Prospective Study of Gender Differences

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Running Head: A Prospective Study of Adolescent Dysthymia

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A Prospective Study of Adolescent Dysthymia

The Early Personality Context of Adolescent Dysthymia:

A Prospective Study of Gender Differences

Adolescence has been identified as a period when appreciable gender differences begin to occur in the nature and frequency of depressive symptoms. Following puberty, there is a sharp increase in the frequency of depression among girls and an apparent, if perhaps less well documented, decrease in the frequency of depression among boys. This gender difference in the prevalence of depressive symptoms is believed to continue throughout adulthood.

Consistent with this gender difference, researchers have conjectured that the psychological dynamics of depression differs for men and women. For example, women's enhanced vulnerability to depression is believed by some to stem from greater feelings of psychological helplessness. We believe that these views may be seen as following from more general developmental considerations of the differential socialization of the sexes. Particularly important to us was Jeanne Block's argument that socialization emphases extend the range of available experiences for boys--not only are boys permitted greater freedom to explore, but curiosity, independence, competition, and achievement-related behaviors are also actively encouraged. For girls, by contrast, socialization pressures restrict the range of potential experiences--by circumscribing spheres of activities, by stressing proprieties, and by ensuring close and cautionary adult supervision. Therefore, boys are more likely than girls to "develop a premise system about the self that presumes or

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anticipates having consequences, instrumental competence, and mastery". Girls, on the other hand, are raised in a manner which reduces their exposure to events which may be expected to encourage awareness of "the evocative role they themselves play in eliciting effects from the environment". In other words, the socialization of girls diminishes the probability that they will develop a sense of competence upon which later instrumental competence builds--they are taught to be more passive, diffident, and self-evaluating.

On the basis of these recognitions, we anticipated that female adolescents with depressive tendencies would be characterized by introspective self-focus, concern with the adequacy of self, and with low self-esteem -- what we call an internalizing pattern of depression - related behaviors. By contrast, male adolescents with depressive tendencies were expected to manifest their internal unhappiness in a more straightforward and visible manner -- via overt action, even hostility and aggressive behaviors -- what we call an externalizing pattern of depression - related behaviors.

The Block and Block longitudinally-followed sample was used to test these hypotheses. At age 18, subjects completed the Center for Epidemiological Studies Depression (CES-D) Scale. Scores on this scale were then related to psychologically comprehensive observer evaluations and self-report ratings of adolescent personality. I will briefly describe these concurrent results.

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At age 18, young women with high CESD scores were seen as brittle, unconventional, and likely to engage in rumination. Although they were not seen by observers as aggressive or as having poor interpersonal relations, these dysthymic young women still described themselves, in their self-reports, as relatively aggressive, unrestrained, and alienated from others. This discrepancy between observable behaviors and privately-expressed feelings suggested a tendency in these young women to internalize, or to withhold, depression-related feelings that might be aversive to others. This discrepancy between observer and self-ratings was not observed for young men with high CESD scores. Consistent with their privately-held feelings of aggression and alienation, dysthymic young men were perceived by others as openly antagonistic, unrestrained, manifestly discontent with themselves, and as unconventional.

The major purpose of this study was to use our longitudinal sample to evaluate whether depressive experiences in late adolescence, as reflected by high CESD scores at age 18, can be foretold by personality characterizations obtained at regular intervals stretching back as far as preschool. The study has two aims: to examine (a) whether depressive moods in adolescence have early personality and intelligence precursors, and (b) whether these precursors, if identified, conform to our theoretical expectations about gender differences in the personality context of depressive symptoms.

I first report relations between CES-D scores and intelligence. Subjects completed the Wechsler Adult Intelligence

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Scale when they were 18-years old and the Wechsler Preschool and Primary Scale of Intelligence when they were 4-years old.

Relative to boys who expressed depressive tendencies at age 18, girls who expressed such tendencies at that time scored higher on IQ tests both concurrently at age 18 and prospectively at age 4. The correlations are included in Table 1 of the handout.

Next, to provide a characterological portrait of 14-year old adolescents who subsequently (four years later) described themselves as dysthymic, we report the correlations between the age 14 personality evaluations in the Q-sort format and CES-D scale scores obtained four years later.

As Table 2 shows, young women who reported depressive symptoms at age 18 were described four years earlier as lacking a sense of meaning in life, as concerned with self adequacy, as anxious, unconventional, ruminating, and unpredictable, as having bodily symptoms of anxiety, as ego-brittle, and as vulnerable to threat. By contrast, in this sample of young 14-year old girls, absence of self-reported depressive symptoms predicted an absence of self-concern, an internally consistent personality structure, social poise, with being sought out for advice and reassurance, with calmness, pride in their own rationality, and with sex-typed manners. The content of these antecedents relations are consistent with the concurrent personality correlates of depressive symptoms we have obtained for this sample at age 18. Both in early and in late adolescence, young dysthymic women convey a tendency toward internalizing--they are self-focused, ruminating, and concerned with personal adequacy.

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As Table 3 shows, a quite different portrait emerged for 14-year old adolescent males who, four years later, described themselves as dysthymic. For males, the following Q-sort items at age 14 anticipated depressive symptoms four years later: self-indulgence, perception of social contexts in sexual terms, interest in the opposite sex, enjoyment of sensuous experiences, self-defensiveness, hostility, sensitivity to criticism, distrustfulness, extrapunitive attitudes, and an orientation toward power. By contrast, absence of self-reported depressive symptoms predicted low productivity, ethical consistency, conservative values, sympathetic manners, a straightforward appearance, insightfulness, concern for intellectual matters, and nurturance towards others. These prospective personality correlates of depressive symptoms were also consistent with the concurrent picture obtained at age 18 for dysthymic young men. Both in early and in late adolescence, young dysthymic men convey a tendency toward externalizing--they tend to channel their impulses, often of a sexual and aggressive kind, into easily recognizable, overt behaviors.

We then went on to examine whether depressive moods in late adolescence has early personality antecedents--in preadolescence, early school-age, and preschool. We report the longitudinal correlations between CES-D scores and California Child Q-sort ratings (CCQ) obtained at ages 11, 7, and 3/4. Based on findings for adolescence, an a priori directional hypothesis was employed for these prospective relations. We anticipated that the personality correlates of CES-D scores would

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be more likely to reflect externalization for boys and internalization for girls. Each CCQ item was rated conceptually with respect to whether it reflected internalization or externalization. Table 4 presents the CCQ items for which significantly different correlations with age 18 CES-D scores were obtained for girls and boys at ages 11, and 7. Table 4 also reports whether the direction of the correlational difference was consistent with the externalization-internalization hypothesis.

The portrait of preadolescent children who subsequently, in late adolescence, described themselves as dysthymic is identifiably different for the sexes. Relative to 11-year old girls who experienced depressive mood at age 18, 11-year old boys who subsequently experienced such moods were seen as comparatively stubborn, limit-stretching, unable to delay, restless, overreacting to minor frustrations, attention-seeking, competitive, manipulative, and sulky. By contrast, relative to subsequently dysthymic preadolescent boys, subsequently dysthymic preadolescent girls were seen as more likely to set high standards, to be eager to please, helpful, help-seeking, and intelligent.

Going back another four years, to age 7, similar gender differences were found. Relative to subsequently dysthymic 7-year old girls, subsequently dysthymic 7-year old boys were seen as contact-seeking, emotionally inappropriate, attention-seeking, limit-stretching, likely to think in unusual ways and to feel unworthy, stubborn, brooding, aggressive, and unable to delay gratification. In comparison, subsequently dysthymic girls were

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more reflective, planful, dependable, obedient, involved, attentive, likely to imitate others, and admired by peers. For both these age levels, the nature of the gender differences is essentially consistent with the externalization-internalization hypothesis.

For preschool, psychologically coherent gender differences were not found for subjects who described themselves as dysthymic at age 18.

Let me briefly summarize and discuss these results. Eighteen-year-old adolescents with depressive tendencies differed, as early as in grade school, in their personality structure. Male dysthymic adolescents were externalizing; female dysthymic adolescents were internalizing. These gender differences continued over the next decade and into adolescence. As might be expected from relations spanning many years, and with many other influences operating in between, these prospective relations were not as strong as the concurrent results. They are, nevertheless, psychologically coherent and anticipatory of later and stronger findings. In particular, these gender-differentiated findings raise the possibility that there is a personality structure vulnerable to depression, that this vulnerability can be identified early in life, and that it differs for girls and boys.

Gender differences in the tendency to perceive the world as noncontingent, that is, a sense of helplessness in controlling the environment, may be relevant to our findings. Whereas women have been viewed as experiencing higher levels of helplessness

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than men, it has also been proposed that if such feelings become a prominent component of depression, there is a greater tendency to submit to depression without overt expressions of anger and hostility, primarily because the actively defensive functions of anger and hostility are perceived as unlikely to succeed. Due to their greater likelihood of experiencing helplessness, dysthymic young women may therefore be less likely to externalize hostile and aggressive affects than dysthymic young. Bearing on this conjecture are some data obtained in our longitudinal study via the experience sampling method -- a method requiring the subjects to report, at random intervals, their activities and mood states. We find that dysthymic girls, in their daily lives outside of the laboratory, are significantly less likely than dysthymic boys to experience control over social events.

Our results indicate that dysphoric affect is positively related to intelligence in female subjects and negatively related to intelligence in male subjects. This finding suggests that the gender differences reported here in the personality correlates of dysphoric affect result from differences in intelligence. In general, intelligent individuals, whether depressed or not, should be more introspective, more likely to engage in deliberate and self-related thought, and to search for connections between mood and attributes of the self. If so, they should be less inclined to engage in immediate action. For example, developmentally primitive or immature behaviors are thought to be characterized by immediate, unmodulated, and direct responses to stimuli (an externalizing pattern) whereas developmentally more

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advanced or mature behaviors are delineated by indirect, symbolic, and ideational responses (an internalizing pattern.

We partialled IQ from relations between CES-D scores and personality evaluations to examine whether intelligence moderated the behavioral manifestations of depressive affect. For girls, in particular, intelligence suppressed relations between personality and depressive affect. Controlling for IQ, subsequently dysthymic 14-year-old girls emerged as significantly more externalizing. Table 5 in the handout reports the partial correlations. These relations suggest that, relative to less intelligent adolescent girls, intelligent adolescent girls, are better able to withhold dysthymia-related affects that are aversive to others.

Although our results are fully prospective, we cannot say, for example, that internalizing attributes in girls and externalizing attributes in boys cause the development of depressive symptoms. While this possibility cannot of course be excluded, the converse possibility--that these characteristics emerge in response to the experience of depressive symptoms itself--is also psychologically tenable. Complicating considerations about the direction of causality are design limitations. Because we assessed depressive symptoms only once, at age 18, we do not know whether early personality characteristics truly precede the experience of depressive experiences or, alternatively, whether dysthymic 18-year old adolescents experienced depressive tendencies early in life. In any event, our results indicate that depressive feelings in late

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adolescence manifest themselves differently for girls and boys--a finding that should have important implications for the detection of depression-prone adolescents. To identify individuals at early risk for depressive disorders, we may have to look for different patterns of behaviors in girls and boys.

Table 1

Intelligence Related to Depressive Symptoms at age 18

<u>IQ</u>	girls	boys	<u>z</u>
WPPSI IQ at age 4	.26*	-.41***	3.12***
WAIS-R IQ at age 18	.24	-.34**	2.43**

* $p < .10$ ** $p < .05$ *** $p < .01$

Table 2

Age 14 California Adult Q-sort Correlates of Subsequent Depressive Symptoms at age 18: Girls

<u>CAQ item</u>	<u>r</u>
<u>Positive Correlates</u>	
22. Feels lack of meaning in life.	.46**
72. Concerned with personal adequacy.	.41**
68. Is basically anxious.	.38**
39. Thinks in unusual ways.	.37*
79. Tends to ruminate.	.35*
50. Unpredictable and changeable.	.32*
10. Anxiety finds outlet in bodily symptoms.	.32*
45. Brittle ego-defense.	.30*
78. Feels cheated and victimized by life.	.29*
40. Is vulnerable to real or fancied threat.	.29*
<u>Negative Correlates</u>	
74. Unaware of self-concern	-.41**
75. Clear-cut, consistent personality.	-.37**
92. Has social poise and presence.	-.37*
29. Is turned to for advice.	-.35*
33. Calm, relaxed in manner.	-.34*
24. Prides self on being objective.	-.32*
93. Is sex-typed.	-.30*
64. Perceptive of interpersonal cues.	-.28

Note-CAQ=California Adult Q-sort. Ns of girls are 46.

* $p < .05$ ** $p < .01$

Table 3

Age 14 California Adult Q-sort Correlates of Subsequent Depressive Symptoms at age 18: Boys

<u>CAQ item</u>	<u>r</u>
<u>Positive Correlates</u>	
67. Is self-indulgent.	.42**
73. Perceives contexts in sexual terms.	.40**
80. Interested in the opposite sex.	.38*
58. Enjoys sensuous experiences.	.34*
36. Is subtly negativistic.	.33*
12. Tends to be self-defensive.	.33*
38. Has hostility towards others.	.32*
13. Is thin-skinned; sensitive to criticism.	.32*
49. Is basically distrustful.	.31*
<u>Negative Correlates</u>	
26. Is productive; gets things done.	-.40**
70. Behaves in ethically consistent manner.	-.37*
7. Favors conservative values.	-.36*
17. Is sympathetic, considerate.	-.35*
77. Appears straightforward, candid.	-.35*
83. Able to see to the heart of problems.	-.35*
24. Prides self on being objective.	-.34*
51. Genuinely values intellectual matters.	-.32*

Note-CAQ=California Adult Q-sort. Ns of boys are 41.

* $p < .05$
 ** $p < .01$

Table 4

Sex Differences ($p < .05$) in Prospective CCQ-Correlates of Depressive Symptoms (CES-D Scores) At Age 18

CCQ-item	Boys	Girls	<u>z</u>	*
AGE 11				
Is stubborn.	.37	-.25	2.96	+
Characteristically stretches limits.	.33	-.24	2.71	+
Is unable to delay gratification.	.21	-.28	2.32	+
Is restless and fidgety.	.15	-.35	2.16	+
Overreacts to minor frustrations.	.16	-.28	2.07	+
Tries to be the center of attention.	.20	-.19	1.86	+
Likes to compete.	.20	-.18	1.79	+
Manipulate others by ingratiation.	.14	-.22	1.72	+
Tends to be sulky or whiny.	.17	-.18	1.66	-
Has high intellectual capacity	-.16	.20	1.65	+
Looks to adults for help, direction.	-.30	.08	1.79	+
Is helpful and cooperative.	-.34	.06	1.92	+
Is eager to please.	-.37	.08	2.16	+
High standards of performance.	-.35	.21	2.67	+
AGE 7				
Seeks physical contact with others.	.20	-.29	2.33	+
Is inappropriate in emotive behavior.	.20	-.29	2.32	+
Tries to be the center of attention	.35	-.13	2.27	+
Characteristically stretches limits.	.35	-.12	2.25	+
Has unusual thought processes.	.14	-.33	2.24	-
Appears to feel unworthy.	.24	-.20	2.05	-
Is stubborn.	.29	-.11	1.93	+
Tends to brood and ruminate or worry.	.36	-.02	1.83	-
Is aggressive.	.22	-.16	1.80	+
Is unable to delay gratification.	.17	-.18	1.65	+
Is admired by other children.	-.13	.15	1.68	-
Imitate characteristics of others.	-.47	-.12	1.72	+
Is attentive and able to concentrate.	-.22	.15	1.73	+
Becomes strongly involved.	-.14	.23	1.74	-
Is obedient and compliant.	-.21	.17	1.78	+
Can be trusted; is dependable.	-.23	.17	1.87	+
Is planful; thinks ahead.	-.25	.16	1.93	+
Is reflective.	-.31	.15	2.18	+

Note-CCQ = California Child Q-sort. One-tailed test.

* A plus sign indicates that the direction of differences is consistent with the E-I hypothesis; a minus sign indicates that the direction of differences is inconsistent with hypothesis.

Table 5

Partial Correlation Coefficients Between Age 14 California Adult Q-sort items and Age 18 Depressive Symptoms after Intelligence has been controlled for: Girls

<u>CAQ item</u>	<u>pr</u>
<u>Positive Correlates</u>	
22. Feels lack of meaning in life.	.55***
72. Concerned with personal adequacy.	.47***
68. Is basically anxious.	.41**
39. Thinks in unusual ways.	.38**
79. Tends to ruminate.	.44**
50. Unpredictable and changeable.	.43**
45. Brittle ego-defense.	.43**
78. Feels cheated and victimized by life.	.39**
40. Is vulnerable to real or fancied threat.	.32*
38. Has hostility towards others.	.36*
12. Tends to be self-defensive.	.37*
55. Is self-defeating.	.41**
36. Is subtly negativistic.	.38*
85. Communicates through nonverbal behavior.	.30*
53. Unable to delay gratification.	.36*
49. Is basically distrustful.	.36*
73. Perceives many contexts in sexual terms.	.34*
62. Tends to be rebellious, nonconforming.	.29*
30. Gives up and withdraws from frustration.	.32*
<u>Negative Correlates</u>	
74. Unaware of self-concern	-.43**
75. Clear-cut, consistent personality.	-.45**
92. Has social poise and presence.	-.43**
29. Is turned to for advice.	-.41*
33. Calm, relaxed in manner.	-.34*
24. Prides self on being objective.	-.47***
64. Perceptive of interpersonal cues.	-.36*
77. Appears straightforward, candid.	-.32*
10. Anxiety finds outlet in bodily symptoms.	-.32*
84. Is cheerful.	-.32*
6. Is fastidious (perfectionist).	-.32*
28. Tends to arouse liking and acceptance.	-.34*
51. Genuinely values intellectual matters.	-.47**
71. Has high aspiration level for self.	-.39**
70. Behaves in ethically consistent manner.	-.31*
3. Has a wide range of interests.	-.34*
88. Is personally charming.	-.35*
26. Is productive; gets things done.	-.34*
98. Is verbally fluent.	-.33*
83. Able to see to the heart of problems.	-.35*

Note-CAQ=California Adult Q-sort. Ns of girls are 46.

* $p < .05$ ** $p < .01$ *** $p < .001$